

|   |                      |                        |
|---|----------------------|------------------------|
| <b>POWER OF ATTORNEY<br/>OR<br/>REVOCATION OF POWER OF ATTORNEY<br/>WITH A NEW POWER OF ATTORNEY<br/>AND<br/>CHANGE OF CORRESPONDENCE ADDRESS</b> | Application Number   | 09/936,758-Conf. #8990 |
|   | Filing Date          | November 15, 2001      |
|   | First Named Inventor | Deard S. Brown         |
|   | Title                | AMIDE DERIVATIVES      |
|   | Art Unit             | 1626                   |
|   | Examiner Name        | K. A. Saeed            |
|   | Attorney Docket No.  | 15652-10700-US         |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

23416

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

| Practitioner(s) Name | Registration Number | Practitioner(s) Name | Registration Number |
|----------------------|---------------------|----------------------|---------------------|
|                      |                     |                      |                     |

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

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Address

City

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Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

SIGNATURE of Applicant or Assignee of Record

|                   |                                    |           |           |
|-------------------|------------------------------------|-----------|-----------|
| Signature         | <i>F. S. Mearns</i>                | Date      | 25/1/2011 |
| Name              | FRANCIS TICENEY                    | Telephone |           |
| Title and Company | SENIOR PATENT DIRECTOR, ASTRAZONCA |           |           |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.